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**\*\* CONTINUING DATA \*\*\*\*\***  
*NM*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
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*none NM*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\*** *NM* **SMALL ENTITY \*\***  
**\*\* 02/14/2002**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>NM</i> Examiner's Signature	<i>NM</i> Initials			

**ADDRESS**  
23521

**TITLE**  
Location method for mobile networks

<b>FILING FEE RECEIVED</b> 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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